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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of PCT/FI02/00832 10/25/2002

** FOREIGN APPLICATIONS *****

FINLAND U20010398 10/25/2001

TP 4/30/7.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **

** 07/07/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FINLAND	SHEETS DRAWING 5	TOTAL CLAIMS 20 14	INDEPENDENT CLAIMS 23
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>TP</i> Initials			

ADDRESS

466

TITLE

Apparatus and arrangement for exercising and supporting an upper limb

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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